

# Elmbrook Baseball Association Tournament

## Official Roster

**Team Name:**

**Age Group (U9, U10, U11, U12, U13 or U14):**

**Contact Name:**

**Phone Number:**

**Head Coach (if different from above):**

**Phone Number:**

**Additional Coach's:**

**(Please include phone number(s) that can be used during the days of the tournament in the event of changes in scheduled game times, etc.)**

	Uniform #	Player Name	Date of Birth
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			

**This form needs to be submitted no later than Jun 15, 2008 to:  
Dave DuChateau, Elmbrook Baseball Association, 18440 Surrey Ln.  
Brookfield, WI 53045**